

Previous editions are obsolete.

EPA, ORD, NERL, ESD/LV Clearance Routing Slip

PLEASE INITIAL BOTH THE CLEARANCE ROUTING SLIP AND THE CHECKOUT LIST

1.	Financial Management Center - Government Travel Credit Card Send email to CINWD <u>Travel@epa.gov</u> documenting that you have no oustanding travel issues. Attach a copy of the email response to these forms.							
2.	Office of Radiation & Indoor Air - Security Clearance, EPA/DOE (N/A if No Clearance) LaPlaza C, 2 nd Floor, Room 629A, Marsha Smith III							
3.	Office of Radiation & Indoor Air - Radiation Check LaPlaza C, 2 nd Floor, Room 629I, Wesley Boyd Radiation Safety Officer, 784-8255							
4.	Health & Safety Office - Chemical Inventory & Waste Management EXC 156, Theresa Gallagher NOTE: <u>Must complete Form LV-198.</u> (attached)							
5.	Supervisor a. CBI Documents b. E-Mail Records c. Passport d. Bankcard e. Laptops & Cell Phones f. Travel Vouchers g. Uniforms or Apparel h. Laboratory Notebooks I. SF-52 Supervisor and employee must complete certification at bottom of LV-197. Employee must include forwarding address at top of LV-197.							
6.	Payroll EXC, 157 May Fong							
7.	Computer Services: a. ADP b. Government Phone Card and USB Stick EXC, Room 214, John Richardson							
8.	Library - Library Books EXC, Room 157, May Fong							
9.	Technical Information Manager - Outstanding Publications POS, Room 31, Jan Contreras <i>NOTE: Must complete 197b</i> (attached)							
10.	Property Office - Outstanding Property POS, 31 Jan Contreras							
11.	Facilities a. Parking Permit b. Keys POS, Room 34, Robert Andrews							
12.	ID/Access Cards a. ID Badge b. Access Card c. Employee Data Sheet POS 34, Robert Andrews							
13.	Records Manager - Records/Files POS, Room 31, Jan Contreras							
14.	Human Resources EXC, 157, May Fong							
	sign and date the certification. Failure to do so will delay final salary check. ilding formerly MSL Building.							

LV-197a 7/24/13



EPA-NERL-LV Employee Separation Checkout List

Please read statement on rev	erse b	efore	comp	leting.	Social Security #:	-			
Employee Name		***************************************			Organization	Effec	tive D	ate of Se	paration
Type of Action Retirement Resignation/Termination			Forwarding Address (Include Zip Code)						
Form 2560 Resources					ng address is different from your current add Authorization for Change of Address, and tu agement Division (MD-29). Ist Be Completed				EPA
		leare				С	leare	ed	
	Yes	No	N/A	Initial		Yes	No	N/A	Initial
Government Travel Credit Card		1	1477		6. Payroll			14,7 (
National Security Clearance					7. a. Computer Services				
3. Radiation Check					b. Government Phone Credit				
Chemical Inventory/Waste 4. Mgmt.					Card and USB Stick				
5. a. CBI Documents					8. Library				
b. E-Mail Records					9. Outstanding Publications				
c. Passport					Employee Must Visit This Area Last				
d. Bankcard					10. Property				
e. Laptops/Cell Phones					11. a. Parking Permit				
f. Travel Vouchers					b. Keys				
g. Uniforms/Apparel					12. EPA Identification/Access Card				
h. Lab Notebooks					13. Records & Files				
i. SF-52	Outrosonnessonnessonnessonnessonnessonnessonnessonnessonnessonnessonnessonnessonnessonnessonnessonnessonnesso	akananananan	*****************						
Certifica I certify that I have returned or accounted for all government property and records for which I am responsible. Employee's Signature					Cleared Not Cleared (Please Expla			ture Date	
Date Late							Date		

A Standard Form (SF) 52, Request for Personnel Action, supporting this separation must accompany this checkout list or be received in the Human Resources Management Division before final clearance will be granted. Your final paycheck will not be released until clearance is granted.

Previous Editions Are Obsolete LV-197 ò 11/20/02



Privacy Act Statement

Authority

Social Security Number. Executive Order 9397, dated November 22, 1943.

Forwarding Address

Reorganization Plan Number 3 of December 2, 1970.

Purposes and Uses

<u>Social Security Number</u>: Disclosure by you of your Social Security Number (SSN) is voluntary. It will be used to properly identify your records on file with the U.S. EPA in various program areas from which you are obtaining certification of clearance. The information gathered will be used only as needed to complete the clearance process as required by EPA Order 3110.5A.

<u>Forwarding Address</u>: Disclosure by you of your forwarding address is voluntary. It will be used in forwarding official papers or appropriate information, and to mail documents to you or to a gaining Government unit or agency.

Effects of Nondisclosure

<u>Social Security Number</u>: Withholding the SSN will cause a delay in the separation process or may result in your not being cleared for separation.

<u>Forwarding Address</u>: Withholding the forwarding address will cause a delay in the separation process or may deter your receipt of outstanding paychecks or other authorized documents.

CLEARANCE PROCEDURES

Outstanding Publications

Information to be provided to the Technical Information Manager (TIM) PRIOR to obtaining clearance signature

Jan Contreras, NERL/ESD Technical Information Manager

TIM needs ample time to check the TIM database after receipt of the information below. Once information has been received and verified, the TIM will initial the "Employee Separation Checkout List"

1.	Who is going take over the author's tasks, publica files? Please list each outstanding report/task indi LV-ESD #; product type; title; and the new author please indicate 'no'.	vidually, providing NERL-				
2.	Who is the author's current supervisor?					
The signature below verifies that the information provided above is accurate.						
Employe	ee Name	Date				

Employee must sign and date the certification above. The signed certification must accompany the LV-197 (Employee Separation Checkout List); LV-197a (EPA/NERL-LV Clearance Routing Slip); and LV-198 (Safety, Health, and Environmental Management Exit Checklist) forms. ALL FORMS MUST BE COMPLETED.

LV-197b, 06/30/06

EPA-LV Safety, Health, and Environmental Ma	anagement
Employee Retirement Resignation/Termination Trans	fer Checkout
Employee Name: Date:	
Retirement Detachment Transfer Date: If <i>transferring</i> , to which organization?	
Is employee enrolled in occupational medical If yes , date of exit physical (contact clinic, 1-	No
Is employee a chemical custodian Yes No If <i>yes</i> , attach chemical custody transfer form dated:	_
Is employee working in a laboratory? Yes No If <i>yes</i> , attach SHEMP Manager exit report dated:	
SHEMP Manager Signature	Date

LV-198 ò 11/20/02



EPA RECORDS MANAGEMENT CHECKLIST FOR SEPARATING/TRANSFERRING OR SEPARATED PERSONNEL

ALL PERSONNEL ARE REQUIRED TO COMPLETE THIS CHECKLIST AND EPA FORM 3110-1 BEFORE SEPARATING FROM EPA OR TRANSFERRING TO ANOTHER PROGRAM OFFICE OR REGION WITHIN EPA. ALL PERSONNEL ARE REMINDED THERE ARE ADDITIONAL RESPONSIBILITIES TO MAINTAIN ANY INFORMATION THAT MAY BE SUBJECT TO A LITIGATION HOLD. EMPLOYEES AND SUPERVISORS MUST FOLLOW SEPARATE CLEARANCE PROCEDURES FOR LITIGATION HOLDS.

PER	SOMRELEACKGROUND INFORM	ATION				property of the second second			
Name:Job Title:									
	loyment Status:EPA Employee _							_	
100000 000000	ALREADY SEPARATED WI	LL BE S	SEPARAT	ING	Apş	proximate date of Separation:		***************************************	
***************************************	ALREADY TRANSFERRED W	ILL BE	TRANSFE	RRING	Арр	proximate date of Transfer:	~~~~	DOCOCOO O O O O O O O O O O O O O O O O	
Supe	rvisor:O	ffice: _		·····	***************************************	Records Liaison Officer:			
	description of job duties:						******************************	*****	
						inspection reports, etc.)			
*******		i	*****************	***************************************					rinne.
POT Gast	ENTIAL RECORD SOURCES TO B box below must be initiated by the employ	ERE		1000		r designee. If not applicable, boxes should be			
Election all	tronic Documents & Records media should be transferred to an EPA	Completed (Initial Below)			Pape and V	er Documents & Records Vorking Documents of completed, ongoing	Completed (Initial Below)		
recordkeeping system (including email, hard drives, portable electronic storage devices, LAN, servers, collaboration tools, etc.)		Emp	Supv* IMO	RLO	and p projec	ending activities (including special cts and workgroups).	Emp	Supy"	RLO
1.	Email records including accounts such as private/personal or secondary (group and/or special purpose) email accounts				8.	Program File Rooms (i.e., RCRA, Air, Water, etc.) and Federal Records Center (FRC) initialed by Records Contact/Designee. Returned all files checked out			
2.	Portable electronic storage devices (CDs, DVDs, USBs, floppies, etc.) (List in comments)				9.	Submitted new records to be filed Superfund Records Center initialed by Superfund Records Contact/Designee Returned all files checked out Submitted new records to be filed			
3.	PDAs (i.e. BlackBerry, Windows Phone, iPhone, cell phone, etc.)				10.	Employee's Workspace Checked for Records and transferred to another employee if not transferred, who will transfer? (List name in comments.)			
4.	Local Area Network Files				11.	Confidential Business information Initialed by Document Control Officer (DCO) Returned all files checked out (TSCA, FIFRA, RCRA, other) Request by supervisor submitted to terminate CSI Authorized Access			
5.	Local hard drive and records on personal computer				12.	Identify current FOIA requests assigned to you by name/number, list in comments.		***************************************	
8.	Shared drive(s) (List the drives in comments.)				13.	Identify and preserve current or potential litigation hold materials by name/number for which you have been or may be identified as a custodian. List name/number in comments. Initialed by Litigation Holds Contact.	·		
7.	Lotus Notes and Microsoft Office Collaboration Tools (e.g., Quickr, SharePoint, One Drive, etc.) (List the tools in comments.)				14.	identify and preserve existing audit or Congressional inquiry materials for which you have been or may be identified as a custodian by name/number in comments.			

EPA Form 3110-49 (02/14)

CC	COMMENTS: For any items requiring additional notation or if any box above is left blank, you must provide explanation.								
	•	**							
C.	RTIFICATIONS								
To app	To the best of my knowledge, I certify that all U.S. Government documentary materials, in any format, have been identified and transferred to the appropriate recordkeeping system or person and that the statements made on this Checklist are true, accurate, and complete.								
1.		(print name)							
2.	Supervisor (signature)	(print name)	Date:						
	OR in the Case of Senior Officials								
	iMO/designee (signature)	(print name)	Date						
3.	RLO/designee (signature)	(print name)	Dat	e ?					

INSTRUCTIONS

This Checklist is to be utilized as detailed in EPA Information Procedures on Preservation of Separating, Transferring or Separated Personnel's Records in Accordance with the Federal Records Act. The purpose of the Checklist is to help EPA personnel identify all potential locations of records in their custodianship. For personnel who have separated, the supervisor/manager should review the person's records first, when at all possible.

PERSONNEL BACKGROUND INFORMATION SECTION to be completed by Employee or Supervisor.

For the statement "Describe major records that you maintain," if the individual does not have specific records management responsibilities, "routine recordkeeping responsibilities" may be entered.

POTENTIAL RECORD SOURCES TO BE REVIEWED SECTION

Personnel, Supervisor/Designee, Records Lielson Officer (RLO)/Designee must all initial the Checklist for each numbered item.

 Initial in the "completed" box next to each description to note that records have been identified, captured in an approved recordkeeping system or transferred to another employee, or enter "N/A" if that item is not applicable for that individual. (Not every description will be applicable to all personnel, i.e., not all personnel have an EPA provided Blackberry, iPhone, etc..)

If any box is left blank, provide explanation in the Comment field.

- 3. For items requesting additional notations, use the Comment field, noting the item number being clarified.
- 4. RLO/designee is responsible to resolve any item which has not been initialed. Final resolution should be noted on the Checklist when completed.

CERTIFICATIONS SECTION

If the individual has already separated from EPA, insert "N/A-already separated" on the Employee signature line.

This completed, certified Checklist should be maintained by the local Records Liaison Officer/Designee in accordance with Schedule 0568 or appropriate subsequent schedule.

EPA Form 3110-49 (02/14)

EMPLOYEE DATA SHEET EPALV

Reset Form Print Form

Effective Date:		Employee Type	
Action CADD CHANGE	○ TERMINATE	○ FED	
Last Name		CONTRACTOR	
		C STUDENT VOLU	NTEER
First Name		○ SEEP	Enter Type if Other
Job Title		OTHER	
Division Branch	BLDG	ROOM	
	ROOM	NOTE	
COMMUNICATIONS	TELEPHONE	ELECT	
LAN EMAIL VOICEMAIL	LICTED		
Has existing EPA Email account	LISTED N		
EMPLOYER INFORMATION	ist	this a new employer no	t listed in the EPA-LV telephone directory?
Contract/Agreement No:	Address		
Employer	City		State Nevada
Employer Contact	Employer Phone		
ACCESS CARD	if Temporary, cho	ose effective date:	IAMS USE ONLY
SELECT FRO	М	то	ACCESS GROUP
24/7 ACCESS? Requires Deputy Director	or Higher approval		CARD No.
IDENTIFICATION BADGE SELECT	HEIGHT	WEIGHT HAIR E	YE COLOR LAST FOUR SS#
APPROVALS *Co-located EPA employee	es (HEASD, OSIM, OARS,	R&IE, HR, LVFC, ERT-W,	OCR) require signature of Division Director
EPA Supervisor* (Required)	ESD Physical Security* (I	Required) Divi	sion Director* (Required for 24/7 access)
SHEM	CSR or Technical Monito	or IAM	S Coordinator
COMMENTS			
FOR IAMS USE ONLY			
Date Rcvd Date	Entered	Docume	ent Signature Field
LV-172 (06/29/11)			

SAMPLE EMAIL FOR CLOSING OUT CREDIT CARD

Send email to CINWD_Travel@epa.gov documenting that you have no outstanding travel issues. Attach a copy of the email response to your checkout list.

Once you receive the email from Cincinnati, you must make sure that it is attached to the checkout package along with your cut up travel credit card.

Sample of email to govtrip

Please close out my travel credit card (insert your name and credit card number) and send me an email stating that my credit card has been closed so I may attach the email to my clearance checklist.

Then you will receive an email from govtrip if all goes well that states.

Your account has now closed. You may destroy the card.